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Docket No.: 042390.P7090

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Stachura, et al.

Application No.: 09/411,407

Filed: September 30, 1999

For:

METHOD AND APPARATUS FOR PERFORMING NETWORK-BASED CONTROL FUNCTIONS ON AN ALERT-

**ENABLED MANAGED CLIENT** 

Examiner: Mirza, Adnan M.

Art Group: 2141

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313 on:

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Sister.

AMENDMENT AND RESPONSE TO THE OFFICE ACTION

RECEIVED

AUG 2 0 2003

Technology Center 2100

AIL STOP AMENDMENT commissioner for Patents 1.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the outstanding Office Action, mailed May 16, 2003, please enter the following amendments and consider the following remarks.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

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Remarks begin on page 5 of this paper.

App No.: 09/411,407

Atty Docket No.: 042390.P7090

Filed: September 30, 1999

Examiner: Adnan M. Mirza

A STATE OF										
	2084	Application No.	09/411,407							
TRANSMITTAL FORM			Filing Date	Septer	nber 30, 1999					
(to be used for all correspondence after initial filing)			First Named Inventor	Thoma	as L. Stachura					
			Group Art Unit	2141						
			Examiner Name	Adnan	M Mirza					
Total Number of Pages in This Submission 12			Attorney Docket Number	42390	P7090					
ENCLOSURES (check all that apply)										
Fee Transmittal Fo	rm	Drawing(s)		After Allowance Communication to Group						
Fee Attache	d	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences					
Amendment / Response		Petition			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final Affidavits/declaration(s)		Petition to Convert a Provisional Application			Proprietary Information					
Extension of Time Request		Power of A Change of	ttorney, Revocation Correspondence Address		Status Letter					
Express Abandonment Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):					
Information Disclosure Statement		Request for Refund			Return Postcard					
PTO/SB/08  Certified Copy of Priority		CD, Number of CD(s)								
Certified Copy of Priority Document(s)  Response to Missing Parts/				RE	CEIVED					
Incomplete Application  Basic Filing Fee		Remarks		AUG 2 0 2003						
Declaration/POA  Response to Missing Parts under 37 CFR 1.52 or 1.53					Technology Center 2100					
1.52 or 1.53			ATTORNEY OF 1							
			NT, ATTORNEY, OR A	JEN I						
Firm or	Lisa Tom, Reg. No. 52,291									
Individual name										
Signature										
Date	August 13, 20	03								
			ING/TRANSMISSION							
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.										
Typed or printed name Annie G. Pearson										
Signature	0 200		Date	August 13, 2003						

s <u>c</u>		Complete if Known							
EE TRANSMITTAL	ŀ					11.407	<del>-</del> -		
for FY 2003	ł	Filing Date				ember 30, 1	999		
Effective 01/01/2003. Patent fees are subject to annual revision.	ŀ	First Named Inventor				nas L. Stack			
	Examiner Name				n M Mirza				
Applicant claims small entity status. See 37 CFR 1.27.	Group/Art Unit			2141					
TOTAL AMOUNT OF PAYMENT (\$) 0.	00								
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METHOD OF PAYMENT (check all that apply)				FE	E CALCULATION	ON (conให้ค่นe	<u> ۲ ا ــا روة</u>		
☐ Check ☐ Credit card ☐ Money ☐ Other ☒ None		3. ADDITIONAL FEES AUG 2 0 2003							
Deposit Account	La	rge Entity	Sma	II Entity	_				
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Deposit Account 02-2666		400			Surcharge - late filing t	-	07		
Number	105 105		2051 2052	65 25	Surcharge - late provis				
Account Blakely, Sokoloff, Taylor & Zafman LLP	1002				cover sheet.				
Name	205		2053	130	Non-English specificat For filing a request for		ation		
The Commissioner is authorized to: ( check all that apply)	181		1812	2,520 920 °	Requesting publication				
Charge fee(s) indicated below Credit any overpayments	180	д 320	1804	320	Examiner action	, Q. Q p			
Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.	180	1,840°	1805	1,840	Requesting publication Examiner action	of SIR after			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	125	110	2251	55	Extension for reply with	nin first month			
FEE CALCULATION	125	2 410	2252	205	Extension for reply with	nin second month			
1. BASIC FILING FEE	125	3 930	2253	465	Extension for reply with	nin third month			
Large Entity Small Entity	125	1,450	2254	725	Extension for reply with	nin fourth month			
Fee Fee Fee Fee Fee Description Fee Paid  Code (\$) Code (\$)	125	55 1,970	2255	985	Extension for reply with	nin fifth month			
750	140	y <sub>4</sub> 320	2401	160	Notice of Appeal				
1001 750 2001 375 Utility filing fee 1002 330 2002 165 Design filing fee	140	2 320	2402	160	Filing a brief in suppor	t of an appeal			
1003 520 2003 260 Plant filing fee	140	3 280	2403	140	Request for oral hearing	ng .			
1004 750 2004 375 Reissue filing fee	145	1,510	2451	1,510	Petition to institute a p		ng		
1005 160 2005 80 Provisional filing fee	145	52 110	2452	55	Petition to revive - una				
SUBTOTAL (1) (\$)	145	53 1,300	2453	650	Petition to revive - unit				
	150		2501	650	Utility issue fee (or reis	ssue)			
2. EXTRA CLAIM FEES Extra Fee from	150		2502	235 315	Design issue fee Plant issue fee				
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Code (\$)	180	09 750	1809	375	Filing a submission aft (37 CFR § 1.129(a))	er final rejection			
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	181	10 750	2810	375	For each additional invexamined (37 CFR § 1				
1203 280 2203 140 Multiple Dependent claim, if not paid			0000	075		* **	E)		
1204 84 2204 42 **Reissue independent claims over original patent	180		2801 1802	375 900	Request for Continued Examination (RCE)				
1205 18 2205 9 "Reissue claims in excess of 20 and over	180	02 900	1002	300	Request for expedited examination of a design application				
original patent	Othe	Other fee (specify) Response to Office Action (					0.00		
SUBTOTAL (2) (\$) 0.00	· Redu	* Reduced by Basic Filing Fee Paid				SUBTOTAL (3)	(\$)	0.00	
**or number previously paid, il greater, For Reissues, see below  Complete (if applicable)									
Registration No. To a control of the state o								-	
Name (Print/Type) Lisa Tom		(Attorney/Agent) 52,291			52,291	Telephone	(503) 684-6200		
Signature Lin La			_			Date	08/13	3/03	